02/20/03 THU 17:29 FAX 3054481098 MCCARRON FOX & ELJAIEK 001 Division of Corp SECRETARY OF STATE TALLAHASSEE, FLORIDA Florida Department of State Division of Corporations Public Access System **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H03000058844 9))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. \mathcal{X} FION OF CORPONATION m To: \cap \sim Division of Corporations Π AM 7: 52 Fax Number : (850)205-0383 m From; Account Name : ALVAREZ, TAYLOR, ELJAIEK & RODRIGUEZ, Account Number : 120030000013 : (305)444-5885 Phone Fax Number : (305)444-8986 LIMITED LIABILITY COMPANY AL

HRivero Investments, LLC

Certificate of Status	0
Certified Copy	0
Page Count	3
Estimated Charge	\$125.00

FILED

Ø 002

03 FEB 20 AM 8: 56

ARTICLES OF ORGANIZATION FOR SELICE FLORIDA HRivero Investments, LLC, a Florida Limited Liability Company

ARTICLE I. - NAME

The name of this limited liability company is **HRivero Investments**, **LLC**, a Florida limited liability company.

ARTICLE II, - ADDRESS

- a. The principal address of the principal office of the limited liability company is 13266 SW 146 Street, Miami, Florida 33186, or at such other location as may hereafter be determined by the Members.
- The mailing address for the limited liability company shall be c/o Alvarez, Taylor, Eljaiek & Rodriguez, P.L., 815 Ponce De Leon, Third Floor, Coral Gables, Florida 33134

ARTICLE III. – REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURES:

The name and the Florida street address of the registered agent is: Alvarez, Taylor, Eljaiek & Rodriguez, P.L., 815 Ponce De Leon, Third Floor, Coral Gables, Florida 33134

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

REGISTERED AGENT'S SIGNATURE

02/20/03 THU 17:29 FAX 3054481098

- --- --

_MCCARRON FOX & ELJAIER

FILED

03 FEB 20 AM 8: 56

ARTICLE IV. - MANAGEMENT

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The limited liability company is to be managed by a manager and the name and address of such manager who is to serve as manager is: Maria Cuesta,13266 S.W. 148 Street, Miami, Florida 33186.

ARTICLE V. - DURATION

The period of duration for the limited liability company shall be perpetual, unless the Company is earlier dissolved.

Signature of a member or an autilorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Beniamin R. Alvarez, Authorized Representative Typed or printed name of signatory